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INTELLECTUAL PROPERTY LAW

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August 16, 2005

Receiver: U.S. Patent and Trademark Office

TEL #:

FAX #: (571) 273-8300

Sender: Susan W. Xu for Ramin Mahboubian

Our Ref. No.: SUN1P839

Re: Application No. 09/939,310

Pages Including Cover Sheet(s): (13)

MESSAGE:

Sir:

Please deliver the attached Amendment AF Transmittal and Amendment B (After Final) for the above referenced application to Examiner Nahar.

Please enter this in the file.

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CONFIDENTIALITY NOTE

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Stepan Sokolov

Attorney Docket No.: SUN1P839/P6719

Application No.: 09/939,310

Examiner: NAHAR, QAMRUN

Filed: August 24, 2001

Group: 2191

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 Title: FRAMEWORKS FOR GENERATION OF
 JAVA MACRO INSTRUCTIONS FOR
 INSTANTIATING JAVA OBJECTS

Confirmation No. 2836

CERTIFICATE OF FACSIMILE TRANSMISSION

 I hereby certify that this correspondence is being transmitted by
 facsimile to fax number 571-273-8300 of the U.S. Patent and
 Trademark Office on August 16, 2005.

Signed: _____

Susan W. Xu

AMENDMENT AF TRANSMITTAL

 Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:


Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	21	MINUS	21		x 25 =	x 50 = 00
Independent Claims	03	MINUS	03		x 100 =	x 200 = 00
Multiple Dependent Claim Present and Fee Not Previously Paid					\$180.00	\$360.00
Total					\$	\$00

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. SUN1P839).

 Respectfully submitted,
 BEYER WEAVER & THOMAS, LLP


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